

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>A.T.</i>		<i>8-2-79</i>
O.I.P.E. CLASSIFIER		<i>12</i>	<i>7/10</i>
FORMALITY REVIEW			<i>6/17/79</i>

INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
 = ..... Allowed                      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted                      O ..... Objected

Claim	Final	Original	Date
1	X	1	
2	X	2	
3	X	3	
4	X	4	
5	X	5	
6	X	6	
7	X	7	
8	X	8	
9	X	9	
10	X	10	
11	X	11	
12	X	12	
13	X	13	
14	X	14	
15	X	15	
16	X	16	
17	X	17	
18	X	18	
19	X	19	
20	X	20	
21	X	21	
22	X	22	
23	X	23	
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26	X	26	
27	X	27	
28	X	28	
29	X	29	
30	X	30	
31	X	31	
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33	X	33	
34	X	34	
35	X	35	
36	X	36	
37	X	37	
38	X	38	
39	X	39	
40	X	40	
41	X	41	
42	X	42	
43	X	43	
44	X	44	
45	X	45	
46	X	46	
47	X	47	
48	X	48	
49	X	49	
50	X	50	

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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